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APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR	R ATTORNEY DOCKET NO.		IEY DOCKET NO.	CONFIRMATION NO.	
10/561,405	10/561.405 12/16/2005		Stuart John Andrews	PIZI.PAU.02.US		1082		
*	: ANTERIOR SHOULD	ER STRETCHING DEV	ICE					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$720	\$300	\$0		\$1020	05/27/2008	
EXAM	INER	ART UNIT	CLASS-SUBCLASS					
MATHEW, FENN C		3764	482-131000					
	ence address or indication	n of "Fee Address" (37	2. For printing on the pa	atent front page, lis	t	D ' - 1	T D	
CFR 1.363).			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
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PLEASE NOTE: Un recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the part a substitute for filing an	atent. If an assigne assignment.	ee is ider	ntified below, the do	ocument has been filed for	
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Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual Co	rporation	or other private gro	up entity Government	
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